



AUGUST 2005 MONTHLY REPORT
(Updated February 2006)

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.
August 2005 Monthly Report - Updated February 2006

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MONTHLY STATISTICS FOR AUGUST 2005 MONTH END
EXECUTIVE SUMMARY**

	Aug 2005*	February 2005
Bank Summary		
Checkwrite	\$10,251,470.05	\$6,206,499.10
Book Balance (US Bank & State General Account)	\$41,252,806.00	\$47,057,865.00
Enrollment		
Plan 1A	7,935	7,642
Plan 1B	9,849	9,110
Plan 2	1,712	1,704
Total	19,496	18,456
New Applications Received	642	530
Claims		
Claims Processed	117,847	100,233
Average Processing Days	8.28	14.00
Claim Inventory - Over 30 Days Old	895	467
Claim Inventory - Total	7,075	6,234
Claims Denied (NonPBM)	9,897	11,143
Claims Denied (PBM)	16,907	7,627
Claim Accuracy Performance	99.55%	100.00%
Customer Service/Policyholder Services		
Number of Calls Received	11,975	10,618
Percentage of Calls Answered	99.00%	91.20%
Written Correspondence - Received	170	680
Written Correspondence - Completed	162	651
Written Correspondence - Inventory	20	62
Average Hold Time for Telephone Calls	22 seconds	3.67

***Please note: Due to the transition of HIRSP plan administration services to a new contractor effective April 1, 2005 claims volumes, payments and other operational statistics may be accounted for differently. Care should be used when trying to compare data from prior to April 1, 2005 to data from April 1, 2005 going forward.**

Also note that adjustments as reported by the previous administrator are no longer being counted in reports found on pages 26, 27 and 28 beginning with April 2005 data.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
AUGUST 2005 MONTHLY REPORT
TABLE OF CONTENTS**

FINANCIAL REPORTS

BREAKDOWN OF INCURRED CLAIMS AND EARNED PREMIUM	1
FINANCIAL REPORT NOTES	2-3
FISCAL YEAR UNAUDITED STATEMENT OF REVENUES, EXPENSES AND CHANGES IN RETAINED EARNINGS	4
FISCAL YEAR DETAIL OF MISCELLANEOUS REVENUE & ADMIN. EXPENSE	5
FISCAL YEAR INTERIM RECONCILIATION	6-7
FISCAL YEAR UNAUDITED BALANCE SHEETS.....	8
PROVIDER CONTRIBUTION REPORT	9
CALENDAR YEAR UNAUDITED STATEMENT OF REVENUES, EXPENSES & CHANGES IN RETAINED EARNINGS	10
CALENDAR YEAR DETAIL OF MISCELLANEOUS REVENUE & ADMIN. EXPENSES	11
CALENDAR YEAR INTERIM RECONCILIATION	12-13
CALENDAR YEAR UNAUDITED BALANCE SHEET	14
EARNED PREMIUM REPORT	15
ASSESSMENT REPORT	16

POLICYHOLDER ACTIVITY REPORTS

APPLICANT ACTIVITY	17
APPLICANT ELIGIBILITY DETERMINATION.....	18
TOTAL POLICIES & SUBSIDIZED POLICIES IN FORCE.....	19
TOTAL POLICIES IN FORCE BY PLAN, GENDER & AGE GROUP.....	20
TOTAL POLICIES IN FORCE BY PLAN, GENDER, ZONE & AGE GROUP	21-23
TOTAL SUBSIDY/NON-SUBSIDY	24
CUSTOMER SERVICE OPERATING REPORT	25
CLAIMS PROCESSED REPORT	26
AVERAGE CLAIM DAYS TO PROCESS REPORT.....	27
CLAIMS INVENTORY REPORT	28
CLAIMS DENIED REPORT	29
PBM CLAIMS DENIED REPORT	30
CLAIMS ACCURACY REPORT.....	31
APPEALS AND GRIEVANCE SUMMARY	32

4Q03					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$22,755,658	\$10,825,220	210.2%	\$894.34	\$425.45
Plan 1B	9,585,581	8,013,666	119.6%	436.24	364.71
Plan 2	4,472,245	2,062,818	216.8%	858.56	396.01
Total	\$36,813,484	\$20,901,704	176.1%	\$699.53	\$397.17
1Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$19,688,284	\$10,273,986	191.6%	\$802.36	\$418.70
Plan 1B	9,728,943	8,769,984	110.9%	404.40	364.54
Plan 2	3,991,381	2,060,924	193.7%	763.61	394.28
Total	\$33,408,609	\$21,104,894	158.3%	\$620.71	\$392.12
2Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$21,923,781	\$10,446,926	209.9%	\$875.83	\$417.34
Plan 1B	11,149,215	9,078,492	122.8%	447.47	364.36
Plan 2	4,689,568	2,092,994	224.1%	892.06	398.13
Total	\$37,762,564	\$21,618,413	174.7%	\$684.04	\$391.60
3Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$21,167,603	\$11,627,516	182.0%	\$857.30	\$470.92
Plan 1B	11,462,876	10,348,024	110.8%	453.98	409.82
Plan 2	4,803,300	2,438,376	197.0%	924.96	469.55
Total	\$37,433,779	\$24,413,917	153.3%	\$678.96	\$442.81
4Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$25,319,831	\$11,459,604	220.9%	\$1,037.61	\$469.62
Plan 1B	14,542,339	10,461,572	139.0%	568.66	409.09
Plan 2	5,108,171	2,436,761	209.6%	986.32	470.51
Total	\$44,970,341	\$24,357,937	184.6%	\$815.36	\$441.64
1Q05					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$22,354,900	\$10,770,000	207.6%	\$964.03	\$464.44
Plan 1B	12,414,834	11,328,000	109.6%	443.42	404.60
Plan 2	4,452,028	2,380,000	187.1%	870.39	465.30
Total	\$39,221,762	\$24,478,000	160.2%	\$696.63	\$434.76

NOTES: Loss Ratio = Incurred Claims / Earned Premiums
Earned Premium includes Premium Subsidies
Incurred Claims include Provider Contributions
Administrative Expenses are not included in this exhibit
Incurred Claims and Earned Premiums are updated quarterly and restated to reflect
the most current information available as of June 30, 2005

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending August 31, 2005**

The motions adopted by the HIRSP Board of Governors regarding changes are summarized as follows:

- 1) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 2) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending August 31, 2005**

These monthly reports do not include the June 30, 2002 CAFR¹ (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

- 1) **Policyholder Retained Earnings, End of Period (page 3 & 9)**
The policyholder retained earnings include both assigned and unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown)
- 2) **Other Receivables (page 7 & 13)**
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.
- 3) **Losses Paid or Approved for Payment (page 3 & 9)**
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

¹ CAFR is the State of Wisconsin annual financial report published by DOA (Dept. of Admin.) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended August 31, 2005
Fiscal Year 2006**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings

Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	8,889,521	9,430,635	-	-	-	-	-	-	-	-	-	-	18,320,156
Premium Subsidized	(414,793)	(418,017)	-	-	-	-	-	-	-	-	-	-	(832,810)
Net Premium Revenues	8,474,728	9,012,618	-	-	-	-	-	-	-	-	-	-	17,487,346
Provider Contribution	2,478,376	2,208,753	-	-	-	-	-	-	-	-	-	-	4,687,129
Insurer Assessments	3,239,924	3,239,924	-	-	-	-	-	-	-	-	-	-	6,479,848
Total Operating Revenues	14,193,028	14,461,295	-	-	-	-	-	-	-	-	-	-	28,654,323
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽³⁾	8,968,093	12,415,734	-	-	-	-	-	-	-	-	-	-	21,383,827
Increase (Decrease) in Unpaid Losses	346,665	(1,528,617)	-	-	-	-	-	-	-	-	-	-	(1,181,952)
Deductible Subsidy Paid	48,493	56,126	-	-	-	-	-	-	-	-	-	-	104,619
Total Medical Losses	9,363,251	10,943,243	-	-	-	-	-	-	-	-	-	-	20,306,494
Pharmacy Losses:													
Losses Paid or Approved for Payment ⁽⁴⁾	3,648,421	4,235,825	-	-	-	-	-	-	-	-	-	-	7,884,246
Increase (Decrease) in Unpaid Losses	79,933	(799,220)	-	-	-	-	-	-	-	-	-	-	(719,287)
Drug Rebates	(230,293)	(251,764)	-	-	-	-	-	-	-	-	-	-	(482,057)
Subsidy - Coinsurance Out-of-Pocket Max	33,131	43,341	-	-	-	-	-	-	-	-	-	-	76,472
Total Pharmacy Losses	3,531,192	3,228,182	-	-	-	-	-	-	-	-	-	-	6,759,374
Total Losses	12,894,443	14,171,425	-	-	-	-	-	-	-	-	-	-	27,065,868
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	402,149	403,846	-	-	-	-	-	-	-	-	-	-	805,995
Navitus Admin Fees	107,223	107,228	-	-	-	-	-	-	-	-	-	-	214,451
DHFS Admin Fees	38,244	22,953	-	-	-	-	-	-	-	-	-	-	61,197
EDS Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
UGS Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Milliman USA Actuarial Services	18,329	14,088	-	-	-	-	-	-	-	-	-	-	32,417
Other Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Administrative Expenses	565,945	548,115	-	-	-	-	-	-	-	-	-	-	1,114,060
Referral fees	5,390	8,610	-	-	-	-	-	-	-	-	-	-	14,000
Total Operating Expenses	13,465,778	14,728,150	-	-	-	-	-	-	-	-	-	-	28,193,928
Net Operating Income (Loss)	727,250	(266,855)	-	-	-	-	-	-	-	-	-	-	460,395
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	122,541	112,533	-	-	-	-	-	-	-	-	-	-	235,074
Total Non-operating Revenues (Expenses)	122,541	112,533	-	-	-	-	-	-	-	-	-	-	235,074
Net Income (Loss)	849,791	(154,322)	-	-	-	-	-	-	-	-	-	-	695,469
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,542,625	10,556,803	-	-	-	-	-	-	-	-	-	-	9,542,625
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,014,178	820,412	-	-	-	-	-	-	-	-	-	-	1,834,590
Retained Earnings, End of Period⁽¹⁾	10,556,803	11,377,215	-	-	-	-	-	-	-	-	-	-	11,377,215
Providers													
Retained Earnings, Beginning of Period	(2,718,521)	(3,140,677)	-	-	-	-	-	-	-	-	-	-	(2,718,521)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(422,156)	(953,219)	-	-	-	-	-	-	-	-	-	-	(1,375,375)
Retained Earnings, End of Period	(3,140,677)	(4,093,896)	-	-	-	-	-	-	-	-	-	-	(4,093,896)
Insurers													
Retained Earnings, Beginning of Period	3,677,147	4,016,540	-	-	-	-	-	-	-	-	-	-	3,677,147
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	339,393	77,952	-	-	-	-	-	-	-	-	-	-	417,345
Retained Earnings, End of Period	4,016,540	4,094,492	-	-	-	-	-	-	-	-	-	-	4,094,492
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(1,100,223)	(1,181,847)	-	-	-	-	-	-	-	-	-	-	(1,100,223)
Current Earnings	(81,624)	(99,467)	-	-	-	-	-	-	-	-	-	-	(181,091)
Retained Earnings, End of Period	(1,181,847)	(1,281,314)	-	-	-	-	-	-	-	-	-	-	(1,281,314)
Total Retained Earnings	10,250,819	10,096,497	-	-	-	-	-	-	-	-	-	-	10,096,497

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2006 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES
AS OF AUGUST 2005**

MISC REVENUE	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	-	-	-	-	-	-	-	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
Fiscal Year 2006 Interim Reconciliation
As Of August 31, 2005**

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	8,968,093	12,415,734	-	-	-	-	-	-	-	-	-	-	21,383,827
Increase (Decrease) in Unpaid Medical Losses	346,665	(1,528,617)	-	-	-	-	-	-	-	-	-	-	(1,181,952)
Pharmacy Losses Paid or Approved for Payment	3,648,421	4,235,825	-	-	-	-	-	-	-	-	-	-	7,884,246
Increase (Decrease) in Unpaid Pharmacy Losses	79,933	(799,220)	-	-	-	-	-	-	-	-	-	-	(719,287)
Drug Rebates	(230,293)	(251,764)	-	-	-	-	-	-	-	-	-	-	(482,057)
Total Administrative Expenses	571,335	556,725	-	-	-	-	-	-	-	-	-	-	1,128,060
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	13,384,154	14,628,683	-	-	-	-	-	-	-	-	-	-	28,012,837
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	122,541	112,533	-	-	-	-	-	-	-	-	-	-	235,074
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	13,261,613	14,516,150	-	-	-	-	-	-	-	-	-	-	27,777,763
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	7,956,967	8,709,690	-	-	-	-	-	-	-	-	-	-	16,666,657
20% Providers	2,652,323	2,903,230	-	-	-	-	-	-	-	-	-	-	5,555,553
20% Insurers	2,652,323	2,903,230	-	-	-	-	-	-	-	-	-	-	5,555,553
5. Subsidy Funding Shares													
Premium subsidies	414,793	418,017	-	-	-	-	-	-	-	-	-	-	832,810
Deductible Subsidies	48,493	56,126	-	-	-	-	-	-	-	-	-	-	104,619
Subsidy - coinsurance out-of-pocket Max	33,131	43,341	-	-	-	-	-	-	-	-	-	-	76,472
Total Subsidies	496,417	517,484	-	-	-	-	-	-	-	-	-	-	1,013,901
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	248,209	258,742	-	-	-	-	-	-	-	-	-	-	506,951
Insurers	248,208	258,742	-	-	-	-	-	-	-	-	-	-	506,950
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	7,956,967	8,709,690	-	-	-	-	-	-	-	-	-	-	16,666,657
Providers	2,900,532	3,161,972	-	-	-	-	-	-	-	-	-	-	6,062,504
Insurers	2,900,531	3,161,972	-	-	-	-	-	-	-	-	-	-	6,062,503
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	8,474,728	9,012,618	-	-	-	-	-	-	-	-	-	-	17,487,346
Premium and Deductible Subsidies Credited to Policyholders	496,417	517,484	-	-	-	-	-	-	-	-	-	-	1,013,901
Subtotal	8,971,145	9,530,102	-	-	-	-	-	-	-	-	-	-	18,501,247
Providers	2,478,376	2,208,753	-	-	-	-	-	-	-	-	-	-	4,687,129
Insurers	3,239,924	3,239,924	-	-	-	-	-	-	-	-	-	-	6,479,848
Total	14,689,445	14,978,779	-	-	-	-	-	-	-	-	-	-	29,668,224

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2006

Policyholders

Prior Period Surplus / (Deficit)	9,542,625	10,556,803	-	-	-	-	-	-	-	-	-	-	9,542,625
Premium (Including Premium and Deductible Subsidies)	8,971,145	9,530,102	-	-	-	-	-	-	-	-	-	-	18,501,247
Less Cost	7,956,967	8,709,690	-	-	-	-	-	-	-	-	-	-	16,666,657
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,014,178	820,412	-	-	-	-	-	-	-	-	-	-	1,834,590
Ending Surplus / (Deficit)	10,556,803	11,377,215	-	-	-	-	-	-	-	-	-	-	11,377,215
Assigned Surplus to SFY 2006	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	10,556,803	11,377,215	-	-	-	-	-	-	-	-	-	-	11,377,215

Providers

Prior Period Surplus / (Deficit)	(2,718,521)	(3,140,677)	-	-	-	-	-	-	-	-	-	-	(2,718,521)
Contribution	2,478,376	2,208,753	-	-	-	-	-	-	-	-	-	-	4,687,129
Less Cost	2,900,532	3,161,972	-	-	-	-	-	-	-	-	-	-	6,062,504
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(422,156)	(953,219)	-	-	-	-	-	-	-	-	-	-	(1,375,375)
Ending Surplus / (Deficit)	(3,140,677)	(4,093,896)	-	-	-	-	-	-	-	-	-	-	(4,093,896)

Insurers

Prior Period Surplus / (Deficit)	3,677,147	4,016,540	-	-	-	-	-	-	-	-	-	-	3,677,147
Assessment	3,239,924	3,239,924	-	-	-	-	-	-	-	-	-	-	6,479,848
Less Cost	2,900,531	3,161,972	-	-	-	-	-	-	-	-	-	-	6,062,503
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	339,393	77,952	-	-	-	-	-	-	-	-	-	-	417,345
Ending Surplus / (Deficit)	4,016,540	4,094,492	-	-	-	-	-	-	-	-	-	-	4,094,492

Unfunded Deductible and Coinsurance Subsidy

Prior Period Surplus / (Deficit)	(1,100,223)	(1,181,847)	-	-	-	-	-	-	-	-	-	-	(1,100,223)
Monthly Change	(81,624)	(99,467)	-	-	-	-	-	-	-	-	-	-	(181,091)
Ending Surplus / (Deficit)	(1,181,847)	(1,281,314)	-	-	-	-	-	-	-	-	-	-	(1,281,314)

Total HIRSP Retained Earnings	10,250,819	10,096,497	-	-	-	-	-	-	-	-	-	-	10,096,497
-------------------------------	------------	------------	---	---	---	---	---	---	---	---	---	---	------------

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
August 31, 2005
Fiscal Year 2006

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,046,067	41,252,806	-	-	-	-	-	-	-	-	-	-
Other Receivables ⁽²⁾	629,508	448,884	-	-	-	-	-	-	-	-	-	-
Drug Rebates Receivable	1,816,840	1,652,849	-	-	-	-	-	-	-	-	-	-
Assessments Receivable	38,902,416	30,923,047	-	-	-	-	-	-	-	-	-	-
Prepaid Items	-	-	-	-	-	-	-	-	-	-	-	-
Total Assets	85,394,831	74,277,586	-	-	-	-	-	-	-	-	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical loss Liabilities	20,350,824	19,170,425	-	-	-	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,904,436	2,491,878	-	-	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	-	-	-	-	-	-	-	-	-	-
Unearned Premiums	15,112,758	9,058,807	-	-	-	-	-	-	-	-	-	-
Unearned Assessments	35,639,168	32,403,320	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	476,826	396,659	-	-	-	-	-	-	-	-	-	-
Total Liabilities	75,144,012	64,181,089	-	-	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	10,556,803	11,377,215	-	-	-	-	-	-	-	-	-	-
Providers	(3,140,677)	(4,093,896)	-	-	-	-	-	-	-	-	-	-
Insurers	4,016,540	4,094,492	-	-	-	-	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(1,181,847)	(1,281,314)	-	-	-	-	-	-	-	-	-	-
Total Retained Earnings	10,250,819	10,096,497	-	-	-	-	-	-	-	-	-	-
Total Liabilities and Fund Equity	85,394,831	74,277,586	-	-	-	-	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MONTHLY PROVIDER CONTRIBUTION REPORT
AS OF AUGUST 2005 MONTH END (8/29/2005)**

Provider Share Calculation for the Current Month - Claims by Claim Type					
Regular Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Professional	\$ 8,342,472.88	36.0%	\$ 5,343,353.88	\$ 3,683,454.62	\$ 1,659,899.26
Hospital Outpatient	\$ 4,656,530.75	27.5%	\$ 3,377,754.28	\$ 2,972,914.50	\$ 404,839.78
Hospital Inpatient	\$ 6,647,342.15	28.1%	\$ 4,778,774.27	\$ 4,155,690.05	\$ 623,084.22
Nursing Home	\$ 82,212.52	23.9%	\$ 62,580.17	\$ 66,705.27	\$ (4,125.10)
Other	\$ 1,045,838.09	23.9%	\$ 796,091.95	\$ 578,891.44	\$ 217,200.51
Total	\$ 20,774,396.39		\$ 14,358,554.55	\$ 11,457,655.88	\$ 2,900,898.67

Crossover Claims					
Claim Type	Medicare Allowed Charges	Medicare Paid	HIRSP Paid	HIRSP Deductible/ Coinsurance	Provider Share
Professional	\$ 866,857.14	\$ 564,268.91	\$ 272,219.42	\$ 31,956.15	\$ (1,587.34)
Hospital Outpatient	\$ 733,757.53	\$ 533,841.69	\$ 177,458.44	\$ 21,509.47	\$ 947.93
Hospital Inpatient	\$ 795,132.76	\$ 686,885.05	\$ 102,097.45	\$ 4,782.20	\$ 1,368.06
Nursing Home	\$ 74,992.62	\$ 47,412.72	\$ 23,881.96	\$ 324.74	\$ 3,373.20
Other	\$ 278,509.37	\$ 196,649.74	\$ 73,504.47	\$ 8,166.36	\$ 188.80
Total	\$ 2,749,249.42	\$ 2,029,058.11	\$ 649,161.74	\$ 66,738.92	\$ 4,290.65

Provider Contribution on the Increase (Decrease) in Unpaid Losses	\$ (348,218.00)
---	-----------------

Total Provider Contribution Non-Pharmacy	\$ 2,556,971.32
--	-----------------

Pharmacy Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Prescription Drug not processed by PBM	\$ -	0.0%			\$ -
Prescription Drug processed by PBM	\$ 6,275,733.56	0.0%	\$ 4,609,567.48	\$ 4,609,567.48	\$ -
Total Provider Contribution Pharmacy	\$ 6,275,733.56		\$ 4,609,567.48	\$ 4,609,567.48	\$ -

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended August 31, 2005
Calendar Year 2005**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	8,114,062	8,889,521	9,430,635	-	-	-	-	66,671,387
Premium Subsidized	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	(352,175)	(414,793)	(418,017)	-	-	-	-	(2,876,669)
Net Premium Revenues	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	9,012,618	-	-	-	-	63,794,718
Provider Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	-	-	-	-	20,577,928
Insurer Assessments	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	-	-	-	-	22,777,942
Total Operating Revenues	12,856,478	12,758,399	12,985,593	13,412,979	13,164,124	13,318,692	14,193,028	14,461,295	-	-	-	-	107,150,588
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽³⁾	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	12,415,734	-	-	-	-	76,076,017
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	(1,528,617)	-	-	-	-	1,080,004
Deductible Subsidy Paid	59,708	78,706	29,706	53,990	95,684	78,118	48,493	56,126	-	-	-	-	500,531
Total Medical Losses	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	12,369,346	9,363,251	10,943,243	-	-	-	-	77,656,552
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	4,235,825	-	-	-	-	32,376,746
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	(799,220)	-	-	-	-	(2,059,792)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	(251,764)	-	-	-	-	(1,645,814)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	43,341	-	-	-	-	158,251
Total Pharmacy Losses	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	3,990,867	3,531,192	3,228,182	-	-	-	-	28,829,391
Total Losses	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	16,360,213	12,894,443	14,171,425	-	-	-	-	106,485,943
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	380,950	390,487	593,501	402,149	403,846	-	-	-	-	2,170,933
Navitus Admin Fees	-	-	-	103,263	105,375	106,618	107,223	107,228	-	-	-	-	529,707
DHFS Admin Fees	23,186	37,147	50,352	18,876	50,258	80,383	38,244	22,953	-	-	-	-	321,399
EDS Admin Fees	76,867	75,812	74,950	(182)	6,974	-	-	-	-	-	-	-	234,421
UGS Admin Fees	239,028	241,709	244,304	-	12,500	250	-	-	-	-	-	-	737,791
Milliman USA Actuarial Services	22,888	54,942	25,797	35,041	29,084	19,242	18,329	14,088	-	-	-	-	219,411
Other Admin Fees	18,597	12,287	26,803	3,570	5,810	5,567	-	-	-	-	-	-	72,634
Total Administrative Expenses	380,566	421,897	422,206	541,518	600,488	805,561	565,945	548,115	-	-	-	-	4,286,296
Referral fees	7,035	4,607	7,455	9,380	4,725	(665)	5,390	8,610	-	-	-	-	46,537
Total Operating Expenses	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	17,165,109	13,465,778	14,728,150	-	-	-	-	110,818,776
Net Operating Income (Loss)	1,477,381	1,145,804	(35,673)	(1,416,982)	(1,452,696)	(3,846,417)	727,250	(266,855)	-	-	-	-	(3,668,188)
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	-	-	-	-	823,946
Total Non-operating Revenues (Expenses)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	-	-	-	-	823,946
Net Income (Loss)	1,557,349	1,213,367	56,650	(1,298,020)	(1,327,247)	(3,741,810)	849,791	(154,322)	-	-	-	-	(2,844,242)
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	-	-	-	-	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	820,412	-	-	-	-	1,728,541
Retained Earnings, End of Period ⁽¹⁾	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	-	-	-	-	11,377,215
Providers													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	-	-	-	-	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	(953,219)	-	-	-	-	(3,057,009)
Retained Earnings, End of Period	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	-	-	-	-	(4,093,896)
Insurers													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	-	-	-	-	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	77,952	-	-	-	-	(856,992)
Retained Earnings, End of Period	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	-	-	-	-	4,094,492
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	-	-	-	-	(622,532)
Current Earnings	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	(99,467)	-	-	-	-	(658,782)
Retained Earnings, End of Period	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	-	-	-	-	(1,281,314)
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	10,096,497	-	-	-	-	10,096,497

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES
AS OF AUGUST 2005

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78	25,102.79										52,586.46
LAB Audit Fee	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00								13,800.00
Speed Scribe													-
UW Extension													-
NASCHIP													-
Legal Services													-
Prest & Assoc-Ind Med Review													-
Independent Review				600.00									600.00
Premium Refund Overdraft Fees				70.00	10.00								80.00
Whyte Hirschboeck Dudek, SC						5,567.08							5,567.08
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	18,596.89	12,286.78	26,802.79	3,570.00	5,810.00	5,567.08	-	-	-	-	-	-	72,633.54

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
Calendar Year 2005 Interim Reconciliation
As Of August 31, 2005

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	12,415,734	-	-	-	-	76,076,017
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	(1,528,617)	-	-	-	-	1,080,004
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	4,235,825	-	-	-	-	32,376,746
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	(799,220)	-	-	-	-	(2,059,792)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	(251,764)	-	-	-	-	(1,645,814)
Total Administrative Expenses	387,601	426,504	429,661	550,898	605,213	804,896	571,335	556,725	-	-	-	-	4,332,833
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	17,056,622	13,384,154	14,628,683	-	-	-	-	110,159,994
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	-	-	-	-	823,946
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	16,952,015	13,261,613	14,516,150	-	-	-	-	109,336,048
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	-	-	-	-	65,601,628
20% Providers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	2,903,230	-	-	-	-	21,867,210
20% Insurers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	2,903,230	-	-	-	-	21,867,210
5. Subsidy Funding Shares													
Premium subsidies	354,700	328,871	306,815	348,067	353,231	352,175	414,793	418,017	-	-	-	-	2,876,669
Deductible Subsidies	59,708	78,706	29,706	53,990	95,684	78,118	48,493	56,126	-	-	-	-	500,531
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	43,341	-	-	-	-	158,251
Total Subsidies	426,923	420,092	327,629	414,720	471,524	460,662	496,417	517,484	-	-	-	-	3,535,451
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	163,815	207,360	235,762	230,331	248,209	258,742	-	-	-	-	1,767,727
Insurers	213,461	210,046	163,814	207,360	235,762	230,331	248,208	258,742	-	-	-	-	1,767,724
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	-	-	-	-	65,601,628
Providers	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	3,161,972	-	-	-	-	23,634,937
Insurers	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	3,161,972	-	-	-	-	23,634,934
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	9,012,618	-	-	-	-	63,794,718
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	327,629	414,720	471,524	460,662	496,417	517,484	-	-	-	-	3,535,451
Subtotal	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	9,530,102	-	-	-	-	67,330,169
Providers	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	-	-	-	-	20,577,928
Insurers	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	-	-	-	-	22,777,942
Total	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	13,779,354	14,689,445	14,978,779	-	-	-	-	110,686,039

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005

Policyholders

Prior Period Surplus / (Deficit)	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	-	-	-	-	9,648,674
Premium (Including Premium and Deductible Subsidies)	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	9,530,102	-	-	-	-	67,330,169
Less Cost	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	-	-	-	-	65,601,628
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	820,412	-	-	-	-	1,728,541
Ending Surplus / (Deficit)	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	-	-	-	-	11,377,215
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	-	-	-	-	11,377,215

Providers

Prior Period Surplus / (Deficit)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	-	-	-	-	(1,036,887)
Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	-	-	-	-	20,577,928
Less Cost	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	3,161,972	-	-	-	-	23,634,937
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	(953,219)	-	-	-	-	(3,057,009)
Ending Surplus / (Deficit)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	-	-	-	-	(4,093,896)

Insurers

Prior Period Surplus / (Deficit)	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	-	-	-	-	4,951,484
Assessment	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	-	-	-	-	22,777,942
Less Cost	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	3,161,972	-	-	-	-	23,634,934
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	77,952	-	-	-	-	(856,992)
Ending Surplus / (Deficit)	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	-	-	-	-	4,094,492

Unfunded Deductible and Coinsurance Subsidy

Prior Period Surplus / (Deficit)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	-	-	-	-	(622,532)
Monthly Change	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	(99,467)	-	-	-	-	(658,782)
Ending Surplus / (Deficit)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	-	-	-	-	(1,281,314)

Total HIRSP Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	10,096,497	-	-	-	-	10,096,497
-------------------------------	------------	------------	------------	------------	------------	-----------	------------	------------	---	---	---	---	------------

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
August 31, 2005
Calendar Year 2005

Unaudited Balance Sheet

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	43,348,568	47,057,865	53,789,890	57,009,607	48,034,750	47,991,033	44,046,067	41,252,806	-	-	-	-
Other Receivables ⁽²⁾	96,643	125,560	94,016	1,742,701	1,472,644	1,234,188	629,508	448,884	-	-	-	-
Drug Rebates Receivable	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	1,586,548	1,816,840	1,652,849	-	-	-	-
Assessments Receivable	3,357,262	94,485	217,131	97,932	85,013	85,013	38,902,416	30,923,047	-	-	-	-
Prepaid Items	52,878	42,291	17,188	1,280	-	-	-	-	-	-	-	-
Total Assets	48,102,102	48,372,096	55,400,565	60,348,355	50,936,789	50,896,782	85,394,831	74,277,586	-	-	-	-
Liabilities and Fund Equity	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Liabilities:												
Unpaid Medical loss Liabilities	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	20,085,992	20,350,824	19,170,425	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	965,110	2,584,048	2,863,469	3,033,333	2,904,436	2,491,878	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-
Unearned Premiums	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	17,186,962	15,112,758	9,058,807	-	-	-	-
Unearned Assessments	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-	35,639,168	32,403,320	-	-	-	-
Accounts Payable and Other Accrued Liabilities	387,083	641,931	419,465	662,586	930,302	529,467	476,826	396,659	-	-	-	-
Total Liabilities	33,604,014	32,660,641	39,632,460	45,878,270	37,793,951	41,495,754	75,144,012	64,181,089	-	-	-	-
Fund Equity:												
Policyholder	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	-	-	-	-
Providers	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	-	-	-	-
Insurers	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	-	-	-	-
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	10,096,497	-	-	-	-
Total Liabilities and Fund Equity	48,102,102	48,372,096	55,400,565	60,348,355	50,936,789	50,896,782	85,394,831	74,277,586	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

EARNED PREMIUM

FISCAL YEAR 2006

EARNED PREMIUM	
MONTH	FY 06
JUL	8,474,728
AUG	9,012,618
SEP	
OCT	
NOV	
DEC	
JAN	
FEB	
MAR	
APR	
MAY	
JUN	
TOTAL	\$ 17,487,346

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Assessment Status
As of August 31, 2005

Prior Fiscal Assessments Receivable Balance:		\$	23,263.10
Fiscal Year 2006 Assessment Amount:	\$	38,883,169.06	
Less: Payments Received			
2005 07		0.00	
2005 08		<u>(7,983,385.56)</u>	
Current Year Total		\$	30,899,783.50
Total Assessments Receivable Balance:		<u>\$</u>	<u>30,923,046.60</u>

Effective July 1, 2005, the assessment billing practice has changed to bill insurers for the full fiscal year assessment at the start of HIRSP's fiscal year. Insurers may elect to pay in full or multiple installments, as in years past. This schedule now reflects this billing change.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Monthly Applicant Activity For August 2005

Number of Applications Pending	July	346
Number of Applications Received	August	642
Number of Applications Rejected	August	115
Number of Applications Closed	August	85
Number of Applications Pending	August	367
Number of Applications Approved	August	421

Detail of Applications Rejected

Eligible for Group Health Coverage	8
Current Medicaid Coverage	0
Not a Wisconsin Resident	2
Did not Qualify for lost Employer Coverage	6
65 or Older	0
Previous HIRSP < 12 Months Ago	1
Currently Covered by Other Insurance	52
No Medical Reason	45
Insufficient Premium Submitted	1
Total	115

Detail of Applications Closed

Applicant Request	11
Proper Eligibility Requested, never received	4
Application Data Requested, never received	70
Total	85

Due to a programming error, the pending application numbers in this report are overstated.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Monthly Applicant Activity

August, 2005

A.	Medicare Eligible	6
B.	HIV +	1
C.	Eligible Individual	179
D.	Letter of Medical Eligibility	235
1.	Letter of Rejection By:	
	Alliance Insurance	2
	American Family	14
	American Medical Security Group	7
	American Republic	8
	Atrium Health Plan	2
	Blue Cross & Blue Shield United of Wisconsin	55
	Dean Health Plan	3
	Fortis Benefits Insurance	20
	Golden Rule Insurance Company	14
	Humana Insurance Company	40
	Insurers Administrative Corporation	1
	John Alden Life Insurance	1
	Mega Life and Health Insurance	13
	Mid-West National Life Insurance Company of	1
	Midwest Security Life Insurance	3
	Pekin Life Insurance	2
	Physicians Plus Insurance	2
	Security Health Plan	7
	Wisconsin Physicians Service Insurance	29
2.	Notice of Benefit Reduction	5
3.	Notice of Premium increase due to a Health Reason	6
Total		421

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Restated Monthly Enrollment Through August 2005 Month End

	Total Subsidy				Total Non-Subsidy					Combined Total			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
September 2004	2,988	748	3,736		5,241	8,504	984	14,729		8,229	8,504	1,732	18,465
October 2004	3,001	762	3,763		5,120	8,474	960	14,554		8,121	8,474	1,722	18,317
November 2004	2,989	765	3,754		5,141	8,509	964	14,614		8,130	8,509	1,729	18,368
December 2004	3,007	762	3,769		5,147	8,588	958	14,693		8,154	8,588	1,720	18,462
January 2005	2,959	744	3,703		4,714	9,138	955	14,807		7,673	9,138	1,699	18,510
February 2005	2,954	742	3,696		4,757	9,231	961	14,949		7,711	9,231	1,703	18,645
March 2005	2,967	740	3,707		4,829	9,367	960	15,156		7,796	9,367	1,700	18,863
April 2005	2,953	743	3,696		4,824	9,374	962	15,160		7,777	9,374	1,705	18,856
May 2005	2,957	737	3,694		4,886	9,487	961	15,334		7,843	9,487	1,698	19,028
June 2005	2,982	734	3,716		4,951	9,645	971	15,567		7,933	9,645	1,705	19,283
July 2005	2,745	707	3,452		5,151	9,713	1,017	15,881		7,896	9,713	1,724	19,333
August 2005	2,778	705	3,483		5,157	9,849	1,007	16,013		7,935	9,849	1,712	19,496

Detail of Total Subsidy Policies in Force as of August Month End

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
September 2004	14,729	551	554	667	1,396	568	18,465
October 2004	14,554	553	546	677	1,424	563	18,317
November 2004	14,614	553	539	679	1,428	555	18,368
December 2004	14,693	554	541	686	1,432	556	18,462
January 2005	14,807	529	526	676	1,451	521	18,510
February 2005	14,949	520	523	678	1,460	515	18,645
March 2005	15,156	520	523	682	1,470	512	18,863
April 2005	15,160	516	516	687	1,475	502	18,856
May 2005	15,334	516	512	687	1,479	500	19,028
June 2005	15,567	516	515	695	1,490	500	19,283
July 2005	15,881	438	476	670	1,369	499	19,333
August 2005	16,013	439	481	668	1,391	504	19,496

Level 0 = Income > \$25,000

Level 1 = Income \$17,000-\$19,999

Level 2 = Income \$14,000-\$16,999

Level 3 = Income \$10,000-\$13,999

Level 4 = Income < or equal to \$9,999

Level 5 = Income \$20,000-\$24,999

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender and Age Group as of August 2005 Month End

Male

Plan	Gender	Age Group	Number of Policyholders
1A	Male	0-24	453
1A	Male	25-29	244
1A	Male	30-34	184
1A	Male	35-39	266
1A	Male	40-44	416
1A	Male	45-49	496
1A	Male	50-54	553
1A	Male	55-59	479
1A	Male	60-64	460
1A	Male	65+	8
Total			3,559

Female

Plan	Gender	Age Group	Number of Policyholders
1A	Female	0-24	415
1A	Female	25-29	219
1A	Female	30-34	209
1A	Female	35-39	251
1A	Female	40-44	348
1A	Female	45-49	480
1A	Female	50-54	613
1A	Female	55-59	796
1A	Female	60-64	1,011
1A	Female	65+	34
Total			4,376

Plan	Gender	Age Group	Number of Policyholders
1B	Male	0-24	308
1B	Male	25-29	67
1B	Male	30-34	86
1B	Male	35-39	171
1B	Male	40-44	307
1B	Male	45-49	504
1B	Male	50-54	686
1B	Male	55-59	908
1B	Male	60-64	1,387
1B	Male	65+	26
Total			4,450

Plan	Gender	Age Group	Number of Policyholders
1B	Female	0-24	195
1B	Female	25-29	64
1B	Female	30-34	73
1B	Female	35-39	166
1B	Female	40-44	301
1B	Female	45-49	512
1B	Female	50-54	749
1B	Female	55-59	1,230
1B	Female	60-64	2,072
1B	Female	65+	37
Total			5,399

Plan	Gender	Age Group	Number of Policyholders
2	Male	0-24	4
2	Male	25-29	12
2	Male	30-34	16
2	Male	35-39	34
2	Male	40-44	76
2	Male	45-49	110
2	Male	50-54	129
2	Male	55-59	113
2	Male	60-64	93
2	Male	65+	131
Total			718

Plan	Gender	Age Group	Number of Policyholders
2	Female	0-24	4
2	Female	25-29	4
2	Female	30-34	18
2	Female	35-39	27
2	Female	40-44	67
2	Female	45-49	99
2	Female	50-54	123
2	Female	55-59	160
2	Female	60-64	177
2	Female	65+	315
Total			994

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of August 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Male	0-24	29
1A	1	Male	25-29	23
1A	1	Male	30-34	19
1A	1	Male	35-39	35
1A	1	Male	40-44	44
1A	1	Male	45-49	50
1A	1	Male	50-54	46
1A	1	Male	55-59	35
1A	1	Male	60-64	34
1A	1	Male	65+	0
Total				315

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Female	0-24	28
1A	1	Female	25-29	31
1A	1	Female	30-34	21
1A	1	Female	35-39	17
1A	1	Female	40-44	28
1A	1	Female	45-49	33
1A	1	Female	50-54	54
1A	1	Female	55-59	78
1A	1	Female	60-64	74
1A	1	Female	65+	3
Total				367

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Male	0-24	141
1A	2	Male	25-29	82
1A	2	Male	30-34	62
1A	2	Male	35-39	82
1A	2	Male	40-44	122
1A	2	Male	45-49	138
1A	2	Male	50-54	150
1A	2	Male	55-59	137
1A	2	Male	60-64	116
1A	2	Male	65+	2
Total				1,032

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Female	0-24	146
1A	2	Female	25-29	60
1A	2	Female	30-34	66
1A	2	Female	35-39	83
1A	2	Female	40-44	110
1A	2	Female	45-49	145
1A	2	Female	50-54	181
1A	2	Female	55-59	203
1A	2	Female	60-64	290
1A	2	Female	65+	9
Total				1,293

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Male	0-24	283
1A	3	Male	25-29	139
1A	3	Male	30-34	103
1A	3	Male	35-39	149
1A	3	Male	40-44	250
1A	3	Male	45-49	308
1A	3	Male	50-54	357
1A	3	Male	55-59	307
1A	3	Male	60-64	310
1A	3	Male	65+	6
Total				2,212

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Female	0-24	241
1A	3	Female	25-29	128
1A	3	Female	30-34	122
1A	3	Female	35-39	151
1A	3	Female	40-44	210
1A	3	Female	45-49	302
1A	3	Female	50-54	378
1A	3	Female	55-59	515
1A	3	Female	60-64	647
1A	3	Female	65+	22
Total				2,716

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of August 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Male	0-24	16
1B	1	Male	25-29	6
1B	1	Male	30-34	12
1B	1	Male	35-39	21
1B	1	Male	40-44	27
1B	1	Male	45-49	31
1B	1	Male	50-54	42
1B	1	Male	55-59	63
1B	1	Male	60-64	80
1B	1	Male	65+	4
Total				302

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Female	0-24	14
1B	1	Female	25-29	6
1B	1	Female	30-34	9
1B	1	Female	35-39	4
1B	1	Female	40-44	17
1B	1	Female	45-49	32
1B	1	Female	50-54	38
1B	1	Female	55-59	77
1B	1	Female	60-64	134
1B	1	Female	65+	2
Total				333

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Male	0-24	95
1B	2	Male	25-29	18
1B	2	Male	30-34	30
1B	2	Male	35-39	56
1B	2	Male	40-44	91
1B	2	Male	45-49	147
1B	2	Male	50-54	209
1B	2	Male	55-59	236
1B	2	Male	60-64	379
1B	2	Male	65+	4
Total				1,265

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Female	0-24	67
1B	2	Female	25-29	20
1B	2	Female	30-34	25
1B	2	Female	35-39	66
1B	2	Female	40-44	86
1B	2	Female	45-49	167
1B	2	Female	50-54	238
1B	2	Female	55-59	382
1B	2	Female	60-64	591
1B	2	Female	65+	9
Total				1,651

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Male	0-24	197
1B	3	Male	25-29	43
1B	3	Male	30-34	44
1B	3	Male	35-39	94
1B	3	Male	40-44	189
1B	3	Male	45-49	326
1B	3	Male	50-54	435
1B	3	Male	55-59	609
1B	3	Male	60-64	928
1B	3	Male	65+	18
Total				2,883

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Female	0-24	114
1B	3	Female	25-29	38
1B	3	Female	30-34	39
1B	3	Female	35-39	96
1B	3	Female	40-44	198
1B	3	Female	45-49	313
1B	3	Female	50-54	473
1B	3	Female	55-59	771
1B	3	Female	60-64	1,347
1B	3	Female	65+	26
Total				3,415

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of August 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Male	0-24	0
2	1	Male	25-29	1
2	1	Male	30-34	4
2	1	Male	35-39	7
2	1	Male	40-44	13
2	1	Male	45-49	17
2	1	Male	50-54	17
2	1	Male	55-59	15
2	1	Male	60-64	9
2	1	Male	65+	8
Total				91

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Female	0-24	1
2	1	Female	25-29	0
2	1	Female	30-34	3
2	1	Female	35-39	1
2	1	Female	40-44	9
2	1	Female	45-49	11
2	1	Female	50-54	17
2	1	Female	55-59	13
2	1	Female	60-64	11
2	1	Female	65+	26
Total				92

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Male	0-24	1
2	2	Male	25-29	4
2	2	Male	30-34	7
2	2	Male	35-39	10
2	2	Male	40-44	22
2	2	Male	45-49	33
2	2	Male	50-54	39
2	2	Male	55-59	23
2	2	Male	60-64	30
2	2	Male	65+	42
Total				211

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Female	0-24	0
2	2	Female	25-29	1
2	2	Female	30-34	9
2	2	Female	35-39	10
2	2	Female	40-44	24
2	2	Female	45-49	29
2	2	Female	50-54	36
2	2	Female	55-59	51
2	2	Female	60-64	52
2	2	Female	65+	98
Total				310

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Male	0-24	3
2	3	Male	25-29	7
2	3	Male	30-34	5
2	3	Male	35-39	17
2	3	Male	40-44	41
2	3	Male	45-49	60
2	3	Male	50-54	73
2	3	Male	55-59	75
2	3	Male	60-64	54
2	3	Male	65+	81
Total				416

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Female	0-24	3
2	3	Female	25-29	3
2	3	Female	30-34	6
2	3	Female	35-39	16
2	3	Female	40-44	34
2	3	Female	45-49	59
2	3	Female	50-54	70
2	3	Female	55-59	96
2	3	Female	60-64	114
2	3	Female	65+	191
Total				592

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Subsidy/Non-Subsidy Restated for August 2005 Month End

Plan		Number of Policyholders
1A	Non-subsidized	5,157
1A	Subsidized	2,778
1B	Non-subsidized	9,849
2	Non-subsidized	1,007
2	Subsidized	705
Total		19,496

Total Subsidy by Level

Subsidy Level	Number of Policyholders
Level 0	16,013
Level 1	439
Level 2	481
Level 3	668
Level 4	1,391
Level 5	504
Total	19,496

	Number of Policyholders
Plan 1A, Zone 1, Non-Subsidized	388
Plan 1A, Zone 1, Subsidized	294
Plan 1A, Zone 2, Non-Subsidized	1,563
Plan 1A, Zone 2, Subsidized	762
Plan 1A, Zone 3, Non-Subsidized	3,206
Plan 1A, Zone 3, Subsidized	1,722
Plan 1B, Zone 1, Non-Subsidized	635
Plan 1B, Zone 2, Non-Subsidized	2,916
Plan 1B, Zone 3, Non-Subsidized	6,298
Plan 2, Zone 1, Non-Subsidized	93
Plan 2, Zone 1, Subsidized	90
Plan 2, Zone 2, Non-Subsidized	311
Plan 2, Zone 2, Subsidized	210
Plan 2, Zone 3, Non-Subsidized	603
Plan 2, Zone 3, Subsidized	405
Total	19,496

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Monthly Service Report

For: August, 2005

Customer Service/Policyholder Services

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
8/5/2005	2,706	2,672	34	1.30%	00:00:22	00:04:49	00:03:54	95.30%
8/12/2005	2,652	2,633	19	0.70%	00:00:21	00:05:28	00:04:11	96.40%
8/19/2005	2,495	2,467	28	1.10%	00:00:24	00:05:19	00:04:06	95.30%
8/26/2005	2,451	2,426	25	1.00%	00:00:21	00:06:54	00:04:09	96.30%

Historical

05-2004	9,600	8,908	692	7.2 %	00:02:58	00:11:22	00:03:11	
06-2004	10,572	9,360	1,212	11.5 %	00:04:36	00:12:11	00:03:20	
07-2004	11,453	10,865	588	4.9 %	00:02:47	00:08:34	00:02:53	
08-2004	9,174	8,660	514	5.6 %	00:02:42	00:09:20	00:02:52	
01-2005	10,390	9,357	1,015	9.6 %	00:04:09	00:11:24	00:03:35	
02-2005	10,618	9,625	933	8.8 %	00:03:40	00:12:35	00:03:29	
03-2005	13,363	11,782	1,561	11.5 %	00:04:34	00:18:00	00:03:30	
04-2005	18,245	17,962	283	1.6 %	00:00:30	00:09:35	00:03:38	93.00%
05-2005	17,638	17,311	327	1.9 %	00:00:39	00:12:39	00:03:39	89.00%
06-2005	18,966	18,309	657	3.5 %	00:00:57	00:12:07	00:03:48	81.00%
07-2005	12,293	12,150	143	1.2 %	00:00:25	00:07:50	00:04:07	94.00%
08-2005	11,975	11,851	124	1.0 %	00:00:22	00:06:54	00:04:03	96.00%

Medical Affairs Telephone

8/5/2005	154	149	5	3.20%	00:00:30	00:05:44	00:03:07	92.20%
8/12/2005	179	171	8	4.50%	00:00:22	00:03:00	00:03:02	92.20%
8/19/2005	147	120	27	3.90%	00:00:27	00:04:54	00:02:31	94.60%
8/26/2005	184	178	6	3.30%	00:00:27	00:02:52	00:03:02	94.60%

PBM Telephone Results

8/5/2005	319	319	0	0.00%	00:00:01	00:01:11		99.40%
8/12/2005	318	318	0	0.00%	00:00:01	00:00:42		99.40%
8/19/2005	305	305	0	0.00%	00:00:01	00:00:13	00:03:45	100.00%
8/26/2005	287	284	2	0.10%	00:00:01	00:00:40	00:03:54	95.70%

All Time Formats are hh:mm:ss. Historical Stats prior to April 1, 2005 have all been converted to the new format.

* ASA = Average Speed of Answer

** Service Level = Calls handled within 120 seconds divided by the number of calls offered.

*** Monthly totals are based on actual month end which is the last day of the month.

Most Commonly Asked Questions to Customer Service/ Policyholder Services

- What is the status of my claim?
- What is the status of my application?
- Why was my claim denied?

Open Written Correspondence

Department	Beginning Inventory	Received	Completed	1 to 2 Days	3 to 5 Days	6+ Days	Ending Inventory
CUSTOMER SERVICE	10	122	120	2	4	6	12
MEDICAL AFFAIRS	0	0	0	0	0	0	0
POLICYHOLDER SERVICES*	2	48	42	4	0	4	8

* Supplemental application documentation is no longer counted as written correspondence.

First Call Resolution

Number of Calls Handled	First Call Resolved	Percent of Calls
10,103	9,404	93.08%

Telephone and Written

Number of Days	Number of Inquires	Number Closed	Percentage
5	2247	2203	98.04%
2	2247	2193	97.60%

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
CLAIMS THAT HAVE FINALIZED TO PAYMENT OR DENIAL AS OF AUGUST 2005 MONTH END(8/29/2005)

	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**	July 2005**	Aug 2005**
	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
Plan 1A													
Pharmacy									23,720	27,571	28,761	27,037	29,298
Inpatient Hospital									71	216	379	228	282
Inpatient Hospital Crossovers									2	5	3	2	5
Outpatient Hospital									2,240	2,532	2,762	1,980	2,724
Outpatient Hospital Crossovers									21	43	23	16	16
Professional									8,566	16,271	15,154	11,676	14,485
Professional Crossovers									31	115	100	161	110
Nursing Home									13	26	44	13	35
Nursing Home Crossovers									0	0	0	0	0
Miscellaneous									1,070	3,032	2,826	1,778	2,715
Miscellaneous Crossovers									4	6	8	46	37
Total Plan 1A									35,738	49,817	50,060	42,937	49,707
Plan 1B													
Pharmacy									20,059	23,142	24,564	23,494	25,910
Inpatient Hospital									66	169	221	143	240
Inpatient Hospital Crossovers									1	3	2	2	2
Outpatient Hospital									1,698	1,903	2,174	1,519	2,165
Outpatient Hospital Crossovers									11	24	34	9	28
Professional									6,617	13,114	12,397	9,421	12,091
Professional Crossovers									63	55	87	67	65
Nursing Home									1	11	2	6	10
Nursing Home Crossovers									0	0	0	0	0
Miscellaneous									717	1,781	1,629	1,112	1,564
Miscellaneous Crossovers									1	15	15	6	8
Total Plan 1B									29,234	40,217	41,125	35,779	42,083
Plan 2													
Pharmacy									12,083	13,905	14,360	13,737	14,788
Inpatient Hospital									4	10	17	11	11
Inpatient Hospital Crossovers									52	103	94	62	112
Outpatient Hospital									155	186	141	149	174
Outpatient Hospital Crossovers									771	1,233	1,236	891	1,286
Professional									311	525	384	416	487
Professional Crossovers									3,133	6,487	5,978	5,530	6,979
Nursing Home									6	6	8	5	9
Nursing Home Crossovers									5	18	37	14	42
Miscellaneous									252	358	344	278	431
Miscellaneous Crossovers									622	1,315	1,417	1,033	1,738
Total Plan 2									17,394	24,146	24,016	22,126	26,057
Total													
Pharmacy	59,962	60,942	60,172	61,367	92,799	63,286	63,621	62,372	61,359	64,618	67,685	64,268	69,996
Inpatient Hospital	377	474	383	268	612	439	540	422	462	395	617	382	533
Inpatient Hospital Crossovers	65	99	71	42	99	75	71	73	96	111	99	66	119
Outpatient Hospital	4,083	4,953	3,962	3,571	5,386	4,145	5,705	4,027	4,448	4,621	5,077	3,648	5,063
Outpatient Hospital Crossovers	1,325	1,216	935	770	1,199	975	1,598	1,015	1,211	1,300	1,293	916	1,330
Professional	26,837	26,033	20,637	22,116	30,612	24,387	32,229	24,762	26,193	29,910	27,935	21,513	27,063
Professional Crossovers	4,465	5,037	3,434	3,675	5,294	3,918	6,286	4,251	4,592	6,657	6,165	5,758	7,154
Nursing Home	35	18	11	16	34	18	14	31	26	43	54	24	54
Nursing Home Crossovers	7	19	14	11	36	11	11	6	4	18	37	14	42
Miscellaneous	1,835	2,278	1,823	1,286	2,120	1,921	2,405	1,817	1,842	5,171	4,799	3,168	4,710
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	1,336	1,440	1,085	1,783
Total	98,991	101,069	91,442	93,122	138,191	99,175	112,480	98,776	100,233	114,180	115,201	100,842	117,847

* The reporting of claims numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

***Starting this month the total number of claims in this report does not balance to the total number of claims reported in the Paid and Denied (non-pharmacy) report because a claim that has both a paid line and a denied line is counted only once in this report. It is counted once as a paid claim and once as a denied claim in the Paid and Denied (non-pharmacy) Report.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
AVERAGE CLAIMS PROCESSING DAYS AS OF AUGUST 2005 MONTH END(8/29/2005)

	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**	July 2005**	Aug 2005**
	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days
Plan 1A													
Inpatient Hospital									30.04	32.29	26.42	23.66	19.50
Inpatient Hospital Crossovers									37.00	23.25	21.66	24.00	11.50
Outpatient Hospital									11.96	10.73	8.44	7.28	6.41
Outpatient Hospital Crossovers									25.00	23.45	24.68	16.35	12.57
Professional									20.39	16.04	10.11	9.65	7.19
Professional Crossovers									23.86	18.75	14.14	12.20	13.76
Nursing Home									13.88	27.53	14.52	27.28	19.00
Nursing Home Crossovers									0.00	0.00	0.00	0.00	0.00
Miscellaneous									23.20	21.24	17.48	17.06	12.51
Miscellaneous Crossovers									36.75	24.60	29.00	22.33	29.16
									19.09	16.19	11.02	10.33	7.94
Plan 1B													
Inpatient Hospital									27.56	29.74	27.46	25.59	19.78
Inpatient Hospital Crossovers									35.00	19.66	16.00	18.00	10.00
Outpatient Hospital									12.69	10.35	8.46	8.28	6.32
Outpatient Hospital Crossovers									27.63	21.20	24.16	19.14	15.25
Professional									20.50	15.15	9.72	8.99	6.89
Professional Crossovers									22.80	22.86	14.83	11.94	15.42
Nursing Home									16.00	37.66	15.00	11.50	10.66
Nursing Home Crossovers									0.00	0.00	0.00	0.00	0.00
Miscellaneous									23.74	20.84	17.49	18.25	12.51
Miscellaneous Crossovers									11.00	23.81	14.35	18.00	12.14
Average for the Month for Plan 1B									19.33	15.29	10.42	9.78	7.48
Plan 2													
Inpatient Hospital									24.00	68.37	21.77	18.75	15.00
Inpatient Hospital Crossovers									29.38	19.32	19.72	22.69	15.52
Outpatient Hospital									19.54	20.59	16.63	21.66	11.52
Outpatient Hospital Crossovers									25.07	16.97	17.06	17.53	13.24
Professional									25.29	23.62	21.91	22.17	12.91
Professional Crossovers									23.33	15.34	13.11	13.54	8.47
Nursing Home									21.33	18.80	18.50	0.00	12.60
Nursing Home Crossovers									22.60	14.33	19.00	24.66	18.89
Miscellaneous									19.19	21.65	18.97	21.14	12.62
Miscellaneous Crossovers									26.35	19.21	18.73	18.37	11.50
Average for the Month for Plan 2									23.91	16.77	14.99	15.19	9.90
Total													
Inpatient Hospital	15.00	17.00	21.00	18.00	17.00	15.00	17.00	15.00	28.58	32.01	26.68	24.22	19.50
Inpatient Hospital Crossovers	11.00	15.00	15.00	16.00	13.00	12.00	14.00	10.00	29.75	19.48	19.70	22.55	15.31
Outpatient Hospital	11.00	14.00	14.00	13.00	13.00	11.00	12.00	12.00	12.45	10.86	8.63	8.08	6.48
Outpatient Hospital Crossovers	15.00	19.00	21.00	22.00	25.00	19.00	19.00	16.00	25.10	17.25	17.38	17.52	13.27
Professional	14.00	16.00	15.00	15.00	14.00	13.00	11.00	11.00	20.53	15.78	10.05	9.52	7.14
Professional Crossovers	14.00	15.00	17.00	17.00	17.00	13.00	12.00	13.00	23.32	15.47	13.15	13.49	8.60
Nursing Home	17.00	17.00	15.00	14.00	14.00	14.00	15.00	15.00	15.76	28.24	14.90	23.77	16.07
Nursing Home Crossovers	9.00	16.00	17.00	11.00	12.00	18.00	15.00	9.00	22.60	14.33	19.00	24.66	18.89
Miscellaneous	14.00	19.00	21.00	24.00	24.00	17.00	18.00	17.00	22.97	21.12	17.57	17.71	12.52
Miscellaneous Crossovers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.39	19.28	18.75	18.41	11.77
Average for the Month	13.00	16.00	16.00	***16.00	16.00	13.00	14.00	12.00	20.12	16.00	11.64	11.30	8.28

* The reporting of average processing days before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Average processing days on claims adjustments used to be reported by the previous administrator. Average processing days will not be reported on claim adjustments beginning with April 2005. Therefore, they have not been reported in this report for any month.

*** Higher than normal claim average resulting from clean up of aged medical review claims

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
HIRSP CLAIMS INVENTORY AS OF AUGUST 2005 MONTH END(8/29/2005)**

Pended Claims Data	Aug 2004* # of Claims	Sep 2004* # of Claims	Oct 2004* # of Claims	Nov 2004* # of Claims	Dec 2004* # of Claims	Jan 2005* # of Claims	Feb 2005* # of Claims	Mar 2005** # of Claims	Apr 2005*** # of Claims	May 2005*** # of Claims	June 2005** # of Claims	July 2005** # of Claims	Aug 2005** # of Claims
Prior to Entry													
Total									1,056	1,443	1,087	747	873
Pre-System Suspend													
Plan 1A									3,954	1,734	1,292	854	1,003
Plan 1B									2,946	1,284	926	721	859
Plan 2									2,318	1,035	1,420	1,066	826
Total								20,482	9,218	4,053	3,638	2,641	2,688
Total Over 30 Days Old									1,696	736	322	64	6
System Pended													
Plan 1A													
Inpatient Hospital									232	256	140	142	54
Inpatient Hospital Crossovers									2	2	0	0	0
Outpatient Hospital									759	660	519	564	144
Outpatient Hospital Crossovers									20	10	6	10	1
Professional									4,347	3,606	2,908	3,091	1,302
Professional Crossovers									46	34	35	40	7
Nursing Home									29	25	25	27	11
Nursing Home Crossovers									0	0	0	0	0
Miscellaneous									1,146	873	684	790	276
Miscellaneous Crossovers									3	2	11	3	0
Total Plan 1A									6,584	5,468	4,328	4,667	1,795
Total Over 30 Days Old									1,856	1,778	1,163	856	463
Plan 1B													
Inpatient Hospital									143	144	95	106	56
Inpatient Hospital Crossovers									2	2	1	0	0
Outpatient Hospital									495	517	397	429	171
Outpatient Hospital Crossovers									14	7	5	12	0
Professional									3,218	2,773	2,163	2,426	954
Professional Crossovers									23	26	16	26	7
Nursing Home									8	2	6	8	6
Nursing Home Crossovers									0	0	0	0	0
Miscellaneous									667	566	390	461	146
Miscellaneous Crossovers									7	2	2	1	1
Total Plan 1B										4,039	3,075	3,469	1,341
Total Over 30 Days Old									1,360	1,296	936	620	386
Plan 2													
Inpatient Hospital									3	1	3	5	0
Inpatient Hospital Crossovers									40	28	25	33	5
Outpatient Hospital									60	46	35	42	2
Outpatient Hospital Crossovers									329	252	292	275	24
Professional									147	87	128	141	22
Professional Crossovers									1,741	1,303	1,092	1,024	206
Nursing Home									2	3	2	1	0
Nursing Home Crossovers									18	19	8	21	0
Miscellaneous									109	101	62	68	18
Miscellaneous Crossovers									557	429	321	407	101
Total Plan 2										2,269	1,968	2,017	378
Total Over 30 Days Old									694	526	329	152	40
Total													
Inpatient Hospital	112	99	129	230	228	142	127	169	378	401	238	253	110
Inpatient Hospital Crossovers	14	13	8	19	17	7	15	22	44	32	26	33	5
Outpatient Hospital	609	818	983	1,040	1,002	963	699	969	1,314	1,223	951	1,035	317
Outpatient Hospital Crossovers	214	256	422	447	581	540	247	403	363	269	303	297	25
Professional	3,104	5,690	7,073	7,344	8,292	6,457	5,872	5,322	7,712	6,466	5,199	5,658	2,278
Professional Crossovers	381	836	1,587	1,483	1,643	1,564	580	1,190	1,810	1,363	1,143	1,090	220
Nursing Home	1	6	7	9	8	4	15	13	39	30	33	36	17
Nursing Home Crossovers	2	2	1	6	2	2	3	1	18	19	8	21	0
Miscellaneous	449	379	617	863	1,137	865	728	836	1,922	1,540	1,136	1,319	440
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	567	433	334	411	102
Total	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	14,167	11,776	9,371	10,153	3,514
Total Over 30 Days Old	1,435	1,198	989	1,437	1,813	1,897	651	868	5,606	4,336	2,750	1,692	895
Grand Total	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	16,858	17,272	14,096	13,541	7,075

* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Prior administrator claim inventory is zero due to transition of plan administration to WPS. 1,807 claims were pending and transferred to WPS on March 31st. WPS received 20,482 HIRSP claims from providers and the prior administrator during the period 3/14/2005 - 3/31/2005.

*** Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

MEDICAL CLAIMS DENIED REPORT*

As of August 2005 Month End (8/29/2005)

Processed Month	Plan 1A		Plan 1B		Plan 2		All Plans			Denial Rate
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total	
July 2004	11,258	4,409	7,199	3,018	3,743	1,643	22,200	9,070	31,270	29.0%
August 2004	11,398	4,318	7,676	3,016	3,924	1,423	22,998	8,757	31,755	27.6%
September 2004	16,461	5,752	11,535	3,880	5,751	2,013	33,747	11,645	45,392	25.7%
October 2004	12,686	4,232	9,584	3,458	4,389	1,540	26,659	9,230	35,889	25.7%
November 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
December 2004	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
January 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%
February 2005	9,529	3,403	7,389	2,752	3,297	1,479	20,215	7,634	27,849	27.4%
March 2005	10,223	2,143	7,789	1,678	4,185	1,109	22,197	4,930	27,127	18.2%
April 2005	18,903	4,196	14,308	3,387	7,814	2,475	41,025	10,058	51,083	19.7%
May 2005	18,296	3,908	14,232	3,010	7,388	2,385	39,916	9,303	49,219	18.9%
July 2005	13,476	3,119	10,537	2,198	6,350	2,121	30,363	7,438	37,801	19.7%
August 2005	17,126	4,083	13,743	3,027	8,691	2,787	39,560	9,897	49,457	20.0%

* Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

END OF MONTH AUGUST 2005 DENIAL REASON DETAIL

Denial Reason	Volume	Top 10 Reasons for Denial
18/DU	3,465	DUPLICATE CLAIM/SERVICE
23	984	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS
HW	677	SERVICES PERFORMED BY A PROVIDER THAT IS NOT MEDICAID CERTIFIED ARE NOT COVERED
49	641	NONCOVERED SERVICES BECAUSE THIS IS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION WITH A ROUTINE EXAM
27/28	553	EXPENSE(S) INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED
51	526	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION
EM	475	WE NEED THE MEDICARE EXPLANATION OF BENEFITS TO PROCESS THIS CHARGE
XZ	450	WE WILL COMPLETE PROCESSING OF THIS CLAIM WHEN WE RECEIVE THE REQUESTED MEDICAL RECORDS
IS	337	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE
V1	191	THE PRIMARY SERVICE INCLUDES THE OTHER SERVICE, NO PAYMENT ALLOWED FOR OTHER SERVICES

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
PHARMACY CLAIMS DENIED REPORT**

As of August 2005 Month End (8/31/2005)*

Processed Month	Denied
August 2004	8,297
September 2004	9,048
October 2004	13,104
November 2004	8,873
December 2004	8,555
January 2005	8,664
February 2005	7,627
March 2005	8,304
April 2005	25,472
May 2005	21,252
June 2005	16,979
July 2005	18,594
August 2005	16,907

END OF MONTH AUGUST 2005 DENIAL REASON DETAIL

Top 10 Reasons for Denial	Volume
DUR Rejected Error-Interaction Drugs	6,444
NDC Not Covered	4,245
Plan Limitation Exceeded	3,043
Refill Too Soon	1,230
Missing/Invalid Dispense as Written Code	455
Duplicate Paid/Captured Claim	364
Filled After Coverage Terminated	280
Non-Matched Cardholder ID	180
Missing/Invalid Sex Code	101
Missing/Invalid Birth Date	79

*** Each prescription processed and denied is counted as one claim**

**Note the different end of month date from previous reports in this packet.
This is due to these figures being taken from a production PBM report
rather than from the current HIRSP plan administrator's reporting files.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Claims Accuracy Performance *
August 2005

Medical

Month	Total Number of Claims	Total of Claims Payments	Total Claim Payments Reviewed	Total Correct Payment	Accuracy Rate
September-2004	31,755	\$4,024,798.00	\$86,524.00	\$86,524.00	100
October-2004	45,392	\$8,169,270.00	\$63,287.00	\$63,287.00	100
November-2004	35,889	\$6,631,268.00	\$79,182.00	\$79,156.00	99.97
December-2004	48,859	\$9,595,500.00	\$52,645.00	\$52,645.00	100
January-2005	36,404	\$6,551,366.00	\$95,201.00	\$95,201.00	100
February-2005	38,874	\$6,256,306.00	\$80,016.00	\$80,016.00	100
March-2005	27,849	\$5,125,139.00	\$58,769.00	\$58,769.00	100
April-2005	28,646	\$4,001,294.29	\$67,258.90	\$67,605.30	99.49
May-2005	46,570	\$8,593,111.00	\$77,521.77	\$76,450.29	98.60
June-2005	44,024	\$10,505,466.00	\$66,752.92	\$64,063.42	99.06
July-2005	38,336	\$7,386,440.00	\$94,437.38	\$94,034.95	99.88
August-2005	45,262	\$9,697,518.00	\$78,001.06	\$77,852.92	99.55

* This report is prepared on a processed date basis using all dates in a calendar month versus other reports that are prepared on a schedule that uses the standard end of month processing dates. Therefore, claims data in this report will not agree with claims data on other reports.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Appeals and Grievance

August, 2005

Claim Appeals

Total Claim Appeals Received	33
Billing/Claim Processing	4
Drug & Drug Formulary	6
Enrollment/Eligibility Requirements	3
Not Covered Benefit	2
Not Medically Necessary	4
Other	1
Plan Administration	8
Prior Authorization	5
 Total Claims/Reinstatements Closed	 35
Claim Appeals Average Number of Days	6.3

Grievances

Grievance Committee	
Billing/Claim Processing	1
Drug & Drug Formulary	2
Enrollment/Eligibility Requirements	2
Not Medically Necessary	1
Other	2
Plan Administration	5
Prior Authorization	1

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.